

10/7/8, 051

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILED DATE
							APPLICANT(S)	
CLAIMS								
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
IND	DEP	IND	DEP	IND	DEP	IND	DEP	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
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33								
34								
35								
36								
37								
38								
39	1		1		1			
40	1		1		1			
41	1		1		1			
42	1		1		1			
43	1		1		1			
44	1		1		1			
45	1		1		1			
46	1		1		1			
47	1		1		1			
48	1		1		1			
49	1		1		1			
50	2		2		2			
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

51		2		2			
52		1		1			
53		1		1			
54		6		6			
55		1		1			
56		1		1			
57		1		1			
58	1		1				
59		1		1			
60		1		1			
61		1		1			
62		1		1			
63		1		1			
64		1		1			
65		1		1			
66		1		1			
67		2		2			
68	1		1				
69		1		1			
70		1		1			
71		1		1			
72		1		1			
73		1		1			
74		1		1			
75		1		1			
76		1		1			
77		1		1			
78		1		1			
79		1		1			
80		5		5			
81		1		1			
82		1		1			
83							
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98							
99							
100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							